

KYPHOPLASTY

What is Kyphoplasty?

Kyphoplasty is a minimally invasive treatment for spine fractures that provides rapid relief from back pain, helps to straighten the spine, and allows you to return quickly to usual daily activities.

What is a spine fracture?

The normal spine has 24 vertebrae that stack upon each other, forming a gentle "S" shaped curve. The part that fractures is the vertebral body, the thick block of bone that forms the front part of the spine. The vertebral bodies provide structural support for your spine.

Vertebral fractures and resulting changes:

A vertebral body fracture occurs when the vertebral body cracks (or fractures) and collapses. This causes your spine to shorten and to fall forward (kyphosis) above the fracture, resulting in a hunched over appearance. The change in the shape of your spine can cause difficulty with walking and everyday activities such as lifting, reaching, pushing, and pulling.

What causes spine fractures?

Most vertebral fractures result from osteoporosis, a disease that weakens your bones. When bones are weakened by osteoporosis, even minor falls or routine activities can result in fractures.

What are some of the symptoms of a spine fracture?

Your doctor will need to diagnose your condition, but you might be alert to some of the indications of spine fracture. Pain may or may not be associated with spine fractures. You might be aware that you are about two inches shorter than you used to be, or you might have quite a bit of pain in the area of the spine that is fractured. The pain may be severe enough that you seek medical treatment.

After a few vertebral fractures, the shape of your spine will change to a stooped or hunched profile. You may have persistent pain due to the tendons and ligaments in your back being stretched by your curved spine. If the pain is only relieved by lying down and not moving, you might suspect a vertebral fracture.

KYPHOPLASTY (CONT)

If you suspect that you have a spine fracture, it is important to see your doctor as quickly as possible. The likelihood of straightening your spine is much better with early

treatment, and most people do not want to live with pain longer than they have to. Only your doctor can determine if Kyphoplasty is right for you.

Other than pain or a shortened, curved profile, are there other effects of vertebral fractures?

You might experience sleeping problems, breathing disorders, and loss of appetite. Some people develop depression or anxiety due to concern that they will experience another fracture. Of most concern is the risk for serious, even fatal, lung problems.

ABOUT THE SURGERY

What will Kyphoplasty do for me?

It is designed to provide fast relief of back pain, helps straighten the spine and allows quick return to daily activities.

What about risks and complications?

Kyphoplasty is a minimally invasive procedure; however, there are potential risks with any surgical procedure, and your doctor will discuss these with you. Complications are rare, but you need to be aware that they can happen.

How is the procedure done?

First, you will have a medical examination and diagnostic tests to determine the location of fractures and the condition of your bone.

You will have anesthesia, either general or local with sedation, as you and your doctor decide which is appropriate for you.

The procedure takes about an hour for each vertebra treated.

Kyphoplasty

The procedure has 4 steps:

The four steps are usually done on the right and left sides of the fractured vertebral body.

STEP 1:



Your doctor will make a narrow, half-inch incision in your back and make a very small pathway into the fractured vertebral body.

STEP 2:



A small bone balloon is placed through the pathway into the vertebral fracture.

STEP 3:



Kyphoplasty

Your doctor will restore the height of your vertebral body by carefully inflating the balloon. This is an important step in helping to straighten your spine.

STEP 4:



An "internal cast" is created inside the vertebral body as the space is filled with a material that will support the bone and prevent further collapse.

AFTER THE PROCEDURE

What should I expect regarding recovery time?

Your doctor may want you to stay in the hospital one day. Daily activities vary quite a bit from person to person, and you will discuss with your doctor when to resume specific activities. You will want to be sure that you have an appointment for a follow-up office visit in about six weeks.

How do I know if I am at risk for vertebral fractures?

If you have been diagnosed with osteoporosis you are at risk for fractures.

The following have been associated with an increased likelihood of osteoporosis:

- Older age
- Female
- Family history of osteoporosis
- History of fractures as an adult
- Early menopause (naturally or as a result of surgery)
- Race: Caucasian and Asian are at high risk, followed by African American and Hispanic
- Small boned and slender women (less than 127 pounds)
- Diet/Lifestyle: low calcium intake, little weight bearing exercise, using tobacco, using alcohol to excess

Kyphoplasty

- Certain medications used on a regular basis can damage bone, such as those used to treat rheumatoid arthritis, gastrointestinal diseases, seizures, and under-active thyroid. Glucocorticoids are a class of medications that are particularly damaging

to bones. Your doctor can advise you if any of the medications you take on a routine basis increase your risk for osteoporosis

Can I prevent vertebral fractures?

For most people, osteoporosis is preventable. Developing strong bones before age 30 is an excellent start, then maintaining them through a healthy diet with plenty of calcium and vitamin D, a healthy lifestyle with weight-bearing exercise, and no smoking or excessive alcohol.)

Bone density testing can indicate if medication is necessary to boost bone development. Current medications approved by the FDA for osteoporosis prevention and treatment include estrogen, alendronate, raloxifene and risedronate. Calcitonin is used for treatment only. Other promising medications are currently being investigated.

Women are at greater risk for osteoporosis. However, men are susceptible to osteoporosis as well.

Pre-op and Pos-top Instructions:

- You may take your routine medications (i.e. blood pressure, diabetic medications) the day of your procedure.
- If you are taking **Coumadin, Plavix, Aspirin (including baby Aspirin 81mg) or any other blood thinners or non-steroidal anti-inflammatory agents (Advil, Ibuprofen, Naproxen, Motrin, etc.), you must notify the office immediately** so the timing of these medications can be explained.
- **You are required to have a responsible adult drive you home.**
- You may not eat **any** food six (6) hours prior to your appointment.
- You may have **sips** of clear liquids up to two (2) hours prior to your appointment.
- You may want to wear loose comfortable clothing the day of your procedure. □

Consult with your Doctor regarding returning to work or strenuous activities.

Location of Procedures:

- Desert Spine and Sports Phoenix office: 3700 N 24th Street, Ste 210. Phoenix, AZ 85016
 Desert Spine and Sports Mesa office: 6634 E Baseline Rd, Ste 101. Mesa, AZ 85206
 □ Desert Spine and Sports Scottsdale office: 8670 E Shea Blvd Suite 102, Scottsdale AZ 85260

*If you are unable to keep this appointment, please give at least 24 hours notice. You can call **480-325-3801** and ask to speak with the **Surgery Scheduling Department**. Thank you.*

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